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ABSTRACT

To describe the attitudes of Arizona educators toward sex education, a questionnaire survey was made of all practicing teachers and administrators in the state's public school systems. Data were collected on topics such as subject content and who should teach sex education. Based on the findings of the survey, it is implied that the lack of unified support for particular forms of sex education may be instrumental in blocking implementation of workable programs. (JS)

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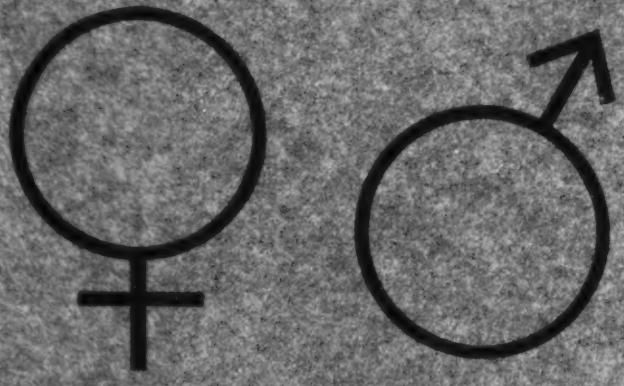
Attitudes of Arizona Educators Toward Sex Education



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EDUCATIONAL SERVICES BULLETIN NO. 37

ATTITUDES OF ARIZONA EDUCATORS TOWARD SEX EDUCATION

Based on a Report by Dr. Robert Schuck
Director of Medical Research, University of Pittsburgh

Co-Editors

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FOREWORD

The search for meaning so essential in the nature of man has recently centered on a personal struggle for psychological freedom. A major component of this struggle is a re-examination and definition of human sexuality. The present study is an attempt to ascertain insights into the attitudes of educators in Arizona toward the dimensions of an adequate sex education program. The choice of Arizona as an appropriate population springs from the influence of professional colleagues and a deep interest in the state.

The writers wish to take this opportunity to express deep appreciation to Dr. James Greenberg and Mr. Bruce Barnhill for their assistance in the development of this study. We are also indebted to the Arizona State Department of Education and Superintendent of Instruction, Dr. W. P. Shofstall, for their support and to the teachers and administrators of the State of Arizona who contributed their time in response to our inquiries.

Robert F. Schuck, Ed. D.
University of Pittsburgh

INTRODUCTION

The bases upon which decisions are made--both knowledge and belief bases--are primarily value questions. Thus, in order for educators and the publics they serve to make responsible decisions, they must analyze their own values as well as those of the sub-culture to which they are accountable.

It is difficult in our society to find a more value-laden or emotionally tinged label than sex. When combined with the sensitive connotation of education, it is indeed a potent and, to some, terrifying concept. As has been demonstrated by the innumerable articles, books, films, controversies and discussions generated by such a topic, public interest and concern remain consistently high.

This growing interest in sex education was reflected by, and in turn spurr
of general support which Harold Howe issued in Washington on August 30, 1966.
and attention have raised many issues and questions relative to sex education,
there is a 'paucity of research' in the area and a consequent lack of data whi
sight into the problems."[1]

Therefore, in an attempt to provide a data base from which to determine direction as public education responds to societal forces, Dr. Robert Schuck, then affiliated with the Division of Research in Medical Education at the University of California and presently Director of Medical Research at the University of Pittsburgh, designed an exploratory study in an effort to describe the attitudes of Arizona educators toward several recognized specific issues in the area of sex education. With the cooperation of the Arizona State Department of Public Instruction, Dr. Schuck devise
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[1]*Robert F. Schuck, Attitudes of Arizona Educators Toward Specific Issues*
(Los Angeles: University of Southern California, School of Medicine, 1970), p

nterest in sex education was reflected by, and in turn spurred by, a policy statement which Harold Howe issued in Washington on August 30, 1966. "While increasing interest raised many issues and questions relative to sex education, it has been noted that of research' in the area and a consequent lack of data which might provide more in-lems."[1]

an attempt to provide a data determine direction as public to societal forces, Dr. affiliated with the Division cal Education at the Univer- and presently Director of the University of Pittsburgh, tory study in an effort to des of Arizona educators to- ized specific issues in the on. With the cooperation of epartment of Public Instruction, Dr. Schuck devised an attitude questionnaire to which all but one of Arizona's school districts responded. It is from these data that we wish to explore further the underlying assumptions, curricular, institutional implications and possible utilization of information, as well as providing access to the initial study and its extensive bibliography. Thanks to the cooperation of many, the study, titled "Attitudes of Arizona Educators Toward Specific Issues in the Area of Sex Education," was completed early in 1970. Although only the most tentative conclusions were inferred from

uck, *Attitudes of Arizona Educators Toward Specific Issues in the Area of Sex Education* ersity of Southern California, School of Medicine, 1970), p. 7.

the responses, the data do provide additional information to permit us to view this area of concern from still other vantage points. It is generally conceded that the attitudes of educators are essential determinants of what sex education programs are, or will be like, and of whether or not they exist at all. Such importance has been confirmed by Isadore Rubin. He stated,

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educator is of crucial
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have placed the burden
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[2]Isadore Rubin, "What Real Sex Education Means," Sex in the Adolescent Yea
and Lester Kirkendall (New York: Association Press, 1968), p. 18.

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"It is clear that the basic attitude of the sex educator is of crucial importance; this will determine the purpose, content and method of his guidance."[2] Furthermore, "official" agencies have placed the burden on definition and development of individual programs on practicing educators, since they have the responsibility of implementation at the local level.

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ubin, "What Real Sex Education Means," Sex in the Adolescent Years, eds. Isadore Rubin endall (New York: Association Press, 1968), p. 18.

Isadore Rubin summarized the existing range of values approaches to sex and sex education in a widely cited article. In his continuum, he defined six major value systems. The first was "repressive asceticism," which he described as completely closed and negative regarding anything in the sexual realm. The second was "enlightened asceticism," described as David Mace's position of holding to traditional morality but being open to discussion of all points of view. Third was "humanistic liberalism," described as supportive of Lester Kirkendall's emphasis on the quality of relationships rather than on the sex act itself. Fourth was "humanistic radicalism," purported to go further than Kirkendall by actively calling for greater sexual freedom and opportunities for sexual expression. Fifth was the position of Albert Ellis, denoted "fun morality," which was described as holding that sex is fun and the more sex, the better. Sixth, and last, was the level of "sexual anarchy," attributed to the French jurist Rene Guyon. Rubin's categorization served to delineate the alternative ethics presently existing in sex morality. This recognition, notably of the emergence of an open pluralism of sex values, has also been cited by other authors as eminently important to the consideration of values approaches in sex education.[3]

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[3] *Isadore Rubin, "Transition in Sex Values--Implications for the Education of Adolescents," Journal of Marriage and the Family, 27:186-187, May, 1965.*

EDUCATORS
SELF

The consequence of the "local-determination" policy has been to place the educators' opinions and attitudes in the position of being the basic resource for resolution of sex education issues. As has been noted by observers of this condition, the resolution of these issues--or the lack of it --and the pertinent attitudes of the educators involved, may be a key to the problem of sex education implementation.

While no one would argue with the need to know oneself, until recently professionals have neglected giving this component much serious thought as it relates to curricular decisions. Research in recent years indicates that the knowledge people have and beliefs they hold about themselves have a significant effect on decision-making processes.

Because the multiple publics which claim our attention maintain a variety of philosophical stances as well as differing views concerning implementation of any program in this sensitive area, it was felt that those to whom the responsibility for decision-making is delegated might best be served by a brief commentary on the highly tentative results of the original lengthy study. A process model may be prerequisite to further action in this domain and is currently in the design stages by the authors.

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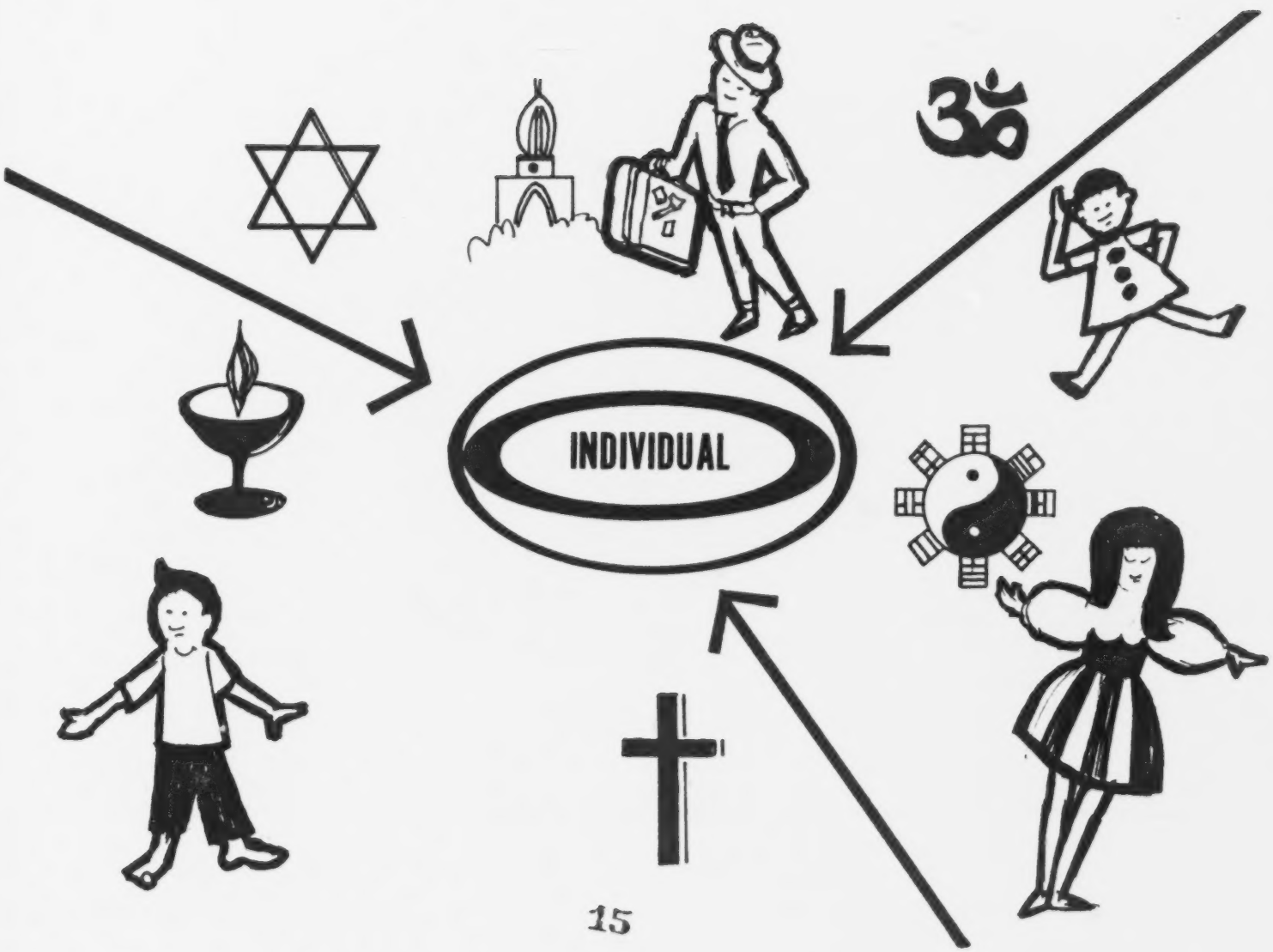
the authors.

IN THE REALM OF CONFLICT CAUSED EITHER BY OPPOSING FORCES OR BY TIME, SPACE, ENERGY AND DEMANDS, WHERE DOES ONE PLACE THE HIGHEST PRIORITY VALUE?

Let us examine the forces as we view them which may underlie a significant finding in Dr. Schuck's study....


INDIVIDUAL

SCHUCK'S STUDY DETERMINED THAT

"WHILE AGE AND RELIGIOUS DIFFERENCES
MAY BE FACTORS IN DEFINING ATTITUDES,

THE MAJOR VARIABLE IS
STILL THE IDIOSYNCRATIC
NATURE OF THE INDIVIDUAL."[4]

[4] *Schuck, op. cit., p. 139.*

Schuck's was an exploratory study which attempted to describe the attitudes of Arizona educators toward several recognized specific issues in the area of sex education. Also considered was the significance of differences in personal and occupational factors of the educators surveyed.

The study was necessarily exploratory for several reasons. First, previous investigations have rarely attempted to describe attitudes toward specific issues in sex education. Available data provide no more direction than an indication of support or non-support for school sex education as a *general* entity, and some inconclusive reports of reaction to single questions on certain issues.

Second, the full range of administrators and secondary and elementary school teachers has not been studied as a unified population. Previous investigations have mostly surveyed only administrators, and the rest have surveyed only teachers.

Third, the issues focused on in this study have not been clearly delineated previously. The literature has suggested that these issues are major problem areas, but there has been inadequate definition of the alternatives within these areas, and a general lack of establishment of clear-cut pro and con positions.[5]

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[5] *Ibid., pp. 12-13.*

For these reasons, conclusive identification of definitive attitudes was not expected. Rather, it was hoped that some direction for further investigation and definition might be provided by describing current patterns of favorable and unfavorable response to several tentative alternatives within recognized areas of general conflict.[6]

PURPOSE OF THE STUDY

The purpose of the study was to describe the attitudes of Arizona educators toward specific issues in the area of sex education. Answers were sought to the following questions:

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[6] *Ibid., p. 13.*

1. What are the expressed attitudes of Arizona educators toward aspects of specific issues in sex education, namely:
   (a) Values approaches in school sex education.
   (b) Treatment of contraception in school sex education.
   (c) Coeducational classes for school sex education.
   (d) Integration of sex education in school curricula.
   (e) Who should teach sex education.
   (f) Subject content in school sex education.
2. Are there observable patterns of agreement or disagreement relative to aspects of these issues?
3. Do educators express more agreement on some aspects within issues than on others?
4. Do patterns of response to the items presented suggest any redefinitions of alternatives?
5. Do any of the alternative proposals relative to these issues obtain a more or less favorable response than other proposals?
6. Do personal background and occupational variables make a difference in overall response to the issues surveyed?

POPULATION AND SAMPLE

"Arizona educators" was the population used for investigation in this study. This population specifically included all practicing teachers and administrators in the public school systems of Arizona. It was decided that a stratified random sample of Arizona educators would be drawn in order to assure adequate representation of strata in the target population. Actual selection of the sample was carried out by using a list of educators in Arizona supplied by the Arizona State Department of Education. The three strata taken into account in the sampling procedure were (1) teachers, grades K-6; (2) teachers, grades 7-12; and (3) school administrators.

The final questionnaire was mailed to the entire sample. The number of completed forms which were received totaled 242, resulting in a return of 96.8%.

A mail-questionnaire was used to obtain information relative to the question posed (Appendix A). The questionnaire was developed and pretested and the final form was submitted to a stratified sample of Arizona educators as described above.[7]

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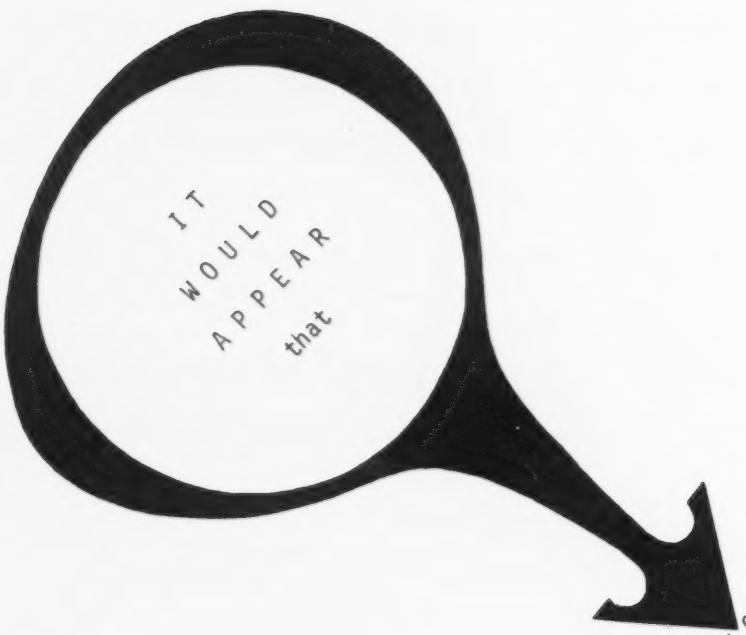
[7] *Ibid., pp. 13-14.*

FINDINGS



EDUCATORS AGREE ON BROAD GENERALIZED CONCEPTS BUT TEND TO STRONGLY DISAGREE ON A VARIETY OF SPECIFIC ISSUES.

Five categories of statements were included in Part A of the Sex Education Questionnaire distributed in Arizona corresponding with six specific issues under investigation. The attribution of a positive or negative "value" to statements was based on an alternative position established for each issue. While the selection of an alternative position to use as a criterion on any issue was basically arbitrary, each had foundation in the body of relevant literature.[8]

(1) Values Approaches

(2) Contraception

(3) Coeducational Classes

(4) Curricular Integration

(5) Who Should Teach

(6) Subject Content

[8] *Ibid., p. 105.*

SEX

Of the two basic alternatives offered in the category "Values Approaches," respondents indicated a consistent preference for school-given guidelines of appropriate behavior rather than for self-development of standards by students. The pattern of responses indicated that this preference was expressed more strongly for the general referent of "premarital sexual behavior" than for any denoted specific level of behavior.[9]

Attitudes toward the general idea of "Coeducation Classes" were positive. However, there was an equally great expression of support for sex-segregation in certain cases of age and special topic consideration.[10]

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[9] *Ibid., p. 134.*

[10] *Ibid., p. 135.*

In regard to "Treatment of Contraception," a favorable attitude was expressed toward the general concept of including contraception education in school. A majority of respondents also favored including certain of the specific aspects proposed, but no aspect received as much support as the general concept. Only instruction in the actual use of contraceptives was directly opposed, but some overall conflict of attitudes toward specific levels of "treatment" was evident.[11]

In the category of "Curricular Integration," a positive attitude was expressed toward the general idea of integrating sex education at relevan points in the school curriculum. More support wa given to "full" integration on the elementary school level than on the secondary level. A more favorable attitude was also expressed toward the proposal made for treating sex education within social studies than for that made in regard to English.[12]

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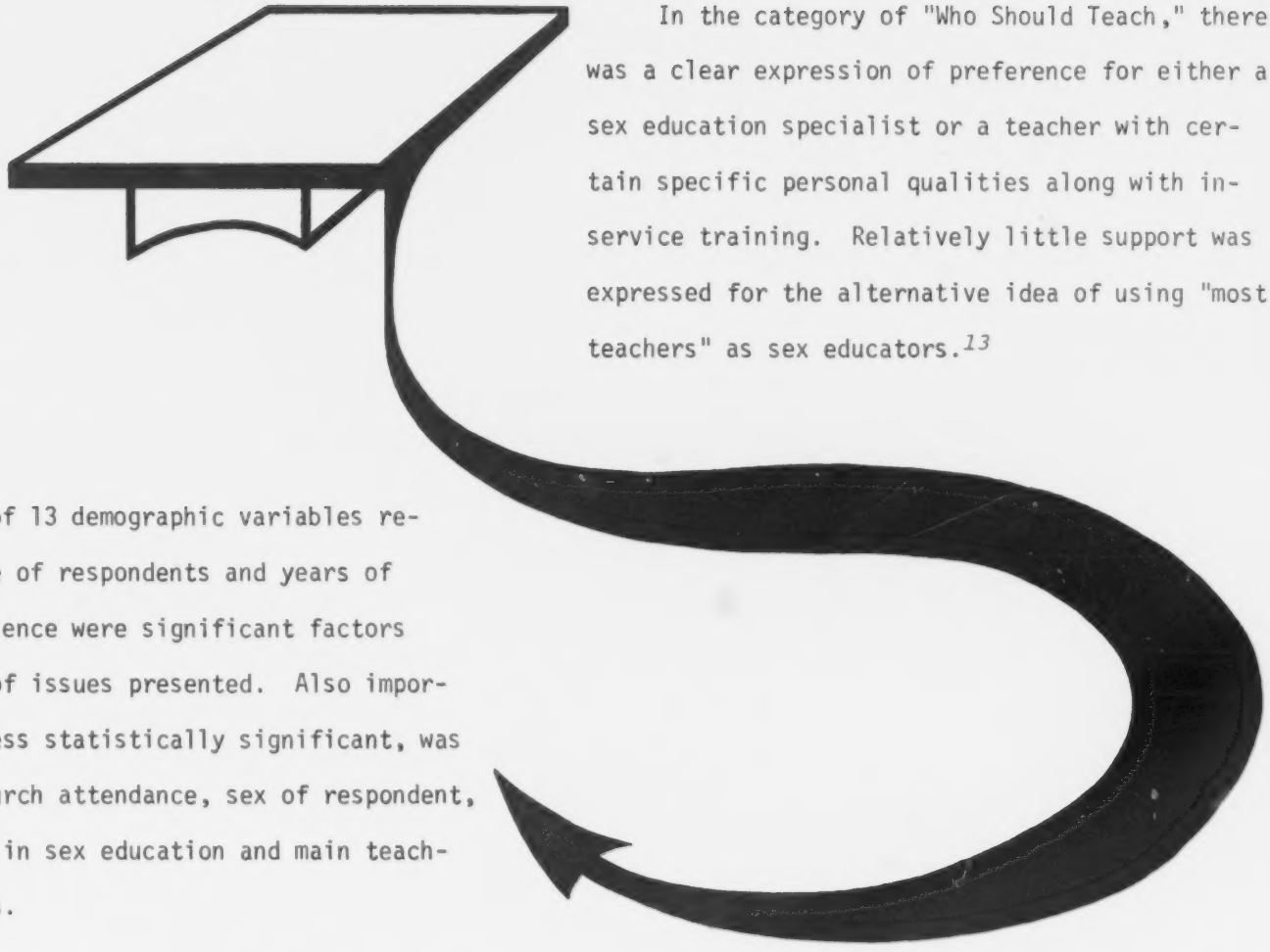
[11] *Ibid.*

[12] *Ibid.*



In the category of "Who Should Teach," there was a clear expression of preference for either a sex education specialist or a teacher with certain specific personal qualities along with in-service training. Relatively little support was expressed for the alternative idea of using "most teachers" as sex educators.[13]

Analysis of 13 demographic variables revealed that age of respondents and years of teaching experience were significant factors in acceptance of issues presented. Also important, though less statistically significant, was evidence of church attendance, sex of respondent, his background in sex education and main teaching assignments.

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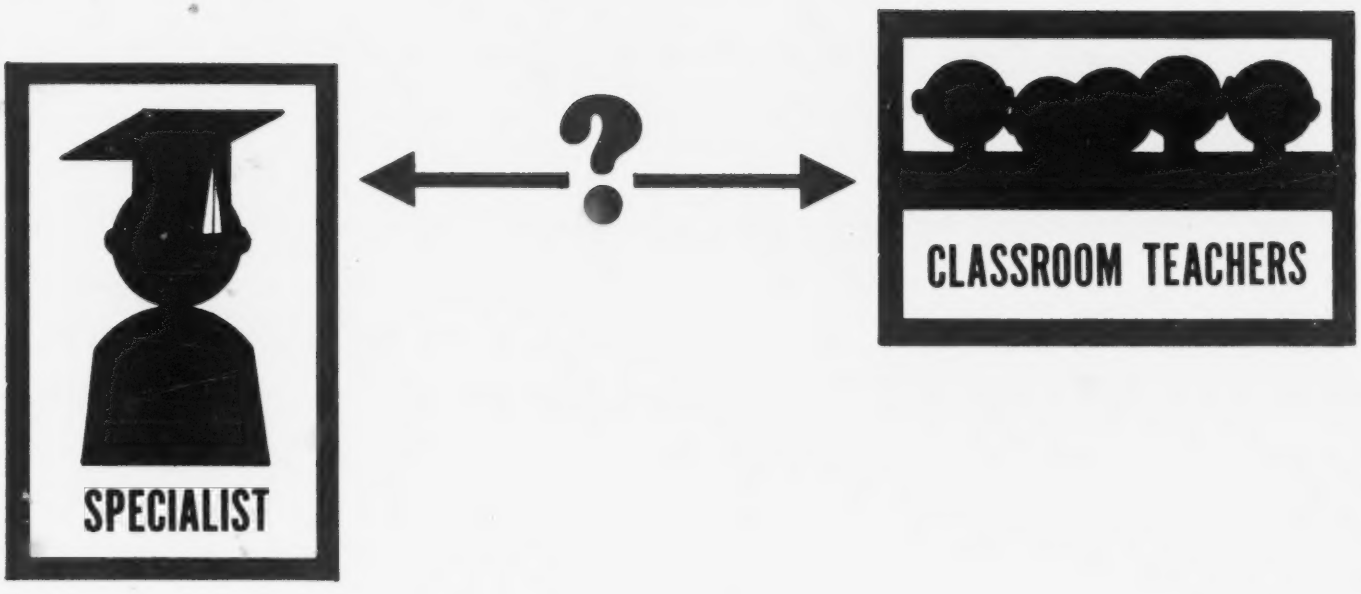
[13] *Ibid.*

From Dr. Schuck's study one would expect that a divorced science teacher in a community of more than 100,000 persons would be most permissive in expressed value, while a married math teacher in a town of under 3,000 population could be expected to be most conservative.

Because much of the disagreement beclouding the instructional mode relative to sex education centers around the qualifications of those persons chosen to provide the learning climate, Dr. Schuck's study probed attitudes on the question, "Who should teach?" In this area also the literature indicates that consensus is indefinable. Like the Maryland sample in which one-half of the respondents favored the classroom teacher and one-third sought "experts," McIntire in Connecticut found general lack of agreement as to such attributes of the classroom teacher as the vague prerequisite that they be involved in "marriages of some duration". A national sample of elementary school teachers indicated that a third felt competent to handle "it" themselves, one-fourth favored the school nurse, and still others selected the physical education teacher. In a Louisiana survey, mothers were among those designated to share responsibility. Nowhere was there any data establishing that marriage "per se" lent reliability for competence; nor is there adequate definition of "marriage of some duration," so that such information further confuses rather than aids in clarification.


SPECIALIST
?
CLASSROOM TEACHERS

Authors such as Eleonore Luckey and Philip Contit favored "specialists"; however, those persons generally perceived as specialists tended to be clergymen or physicians equally untrained in this specific area. The most prevalent view favored utilizing the regular classroom teacher with prerequisite personal qualities in combination with in-service and workshop training. ARIZONA EDUCATORS CLEARLY SUPPORTED A PREFERENCE FOR EITHER A SEX EDUCATION SPECIALIST OR TEACHER WITH CERTAIN SPECIFIC PERSONAL QUALITIES IN CONJUNCTION WITH SPECIALIZED TRAINING WHILE REJECTING THE ALTERNATIVES THAT "MOST TEACHERS" COULD FUNCTION EFFECTIVELY AS SEX EDUCATORS.

Arizona educators maintained a general consensus on the need for trained personnel but tended to disagree on whether such persons should emerge from the ranks of the regular classroom or should be specially recruited for this specific purpose.

Lack of Implementation of Sex Education Programs. Although the literature is replete with support and justification for sex education, there is apparently little relative "action" in the way of program implementation. Numerous articles have simultaneously praised sex education, cited support for it, and then lamented the lack of progress in implementation of actual programs.[14]

Importance of Educators' Attitudes. The responsibility for definition and implementation of sex education programs has been placed on educators in local school systems. The attitudes of these educators, therefore, must be viewed as important elements in the process of such definition and implementations.[15]

Various "allegations" regarding attitudes of educators are evident in the literature. Some reports have concluded that educators basically favor sex education. One report concluded that teachers strongly favored sex education, but negative attitudes of administrators blocked implementation of programs. Other statements have contended that educators have basically negative attitudes toward sex education and that these attitudes are the major deterrents to implementation.[16]

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[14] *Ibid., p. 10.*

[15] *Ibid., p. 11.*

[16] *Ibid., p. 12.*

IMPLICATIONS

Certain basic trends and patterns which emerged from the results of this study may have meaningful implications for the area of school sex education.[17] These implications pertain to aspects of definition and implementation of sex education programs. The perceptions of the results and the implications suggested are as follows:

A fairly consistent trend of response on the part of the educators surveyed seemed to be that of expressing greater levels of agreement with generalized propositions than with any specific aspects pertaining to those propositions.[18]

Lack of agreement on specific approaches and ways of dealing with sex education may be blocking implementation despite generalized expressions of support. Part of the motivation for this study was to see if proposals on specific issues were supported by educators as much as sex education as a whole and was reported to be supported.[19] Evidently, they are not, and this relative lack of agreement on the more detailed levels of considerations indicates that REPORTS OF SUPPORT FOR SEX EDUCATION ARE MISLEADING. In fact, lack of unified support by educators for particular forms of sex education may be instrumental in blocking implementation of workable programs.

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[17] *Ibid., p. 136.*

[18] *Ibid., p. 137.*

[19] *Ibid.*

Venereal disease, menstruation, conception and divorce received almost unanimous approval for inclusion in a sex education curriculum at some stage, while teenage slang, pornography, oral genital sexual contact and sexual techniques were least favored in the rank ordering of 18 specific content areas by Arizona educators (Table 1).

While the relative lack of consensus on details of approaches may be a hindering factor, the indicated support for certain general concepts could have a positive effect. Curriculum workers in this area might take note of the fact that "contact points" do exist. On some level at least, and even in the case of specific issues, there is a modicum of support for concepts. These favored concepts, or "contact points," could be used as a base from which common attitudes might be analyzed for their similarity. The insights gained could then be of help in achieving agreement on more specific levels.

TABLE 1

RESPONSES ON SUBJECT CONTENT FOR SEX EDUCATION BY RANK ORDER OF APPROVAL

Content Topic	Rank[a]	SA		GA		UN		GD		SD		N	Mean
		No.	%	No.	%	No.	%	No.	%	No.	%		
Venereal Disease	1	165	68	61	25	3	2	5	2	6	2	242	1.43
Menstruation	2	145	60	80	33	6	4	3	1	6	2	242	1.50
Conception	3	122	50	105	43	3	3	6	2	3	1	242	1.57
Divorce	4	111	46	84	35	18	9	17	7	10	4	242	1.85
Illegitimacy	5	105	43	83	34	14	7	25	10	13	5	242	1.97
Menopause	6	90	37	100	41	14	6	23	10	13	5	242	2.02
Male and Female Sex Roles	7	98	40	82	34	19	9	17	7	24	10	242	2.07
Contraception	8	94	39	82	34	19	9	26	11	19	8	242	2.10
Masturbation	9	72	30	91	38	35	16	17	7	25	10	242	2.27
Abortion	10	73	30	97	40	18	9	28	12	24	10	242	2.28
Homosexuality	11	65	27	97	40	29	13	23	10	26	11	242	2.33
Venereal Disease Prophylaxis	12	68	28	67	28	36	16	39	16	30	12	242	2.54
Impotency and Frigidity	13	52	21	88	36	34	15	37	15	39	12	242	2.57
Sexual Behavior within Marriage	14	64	26	73	30	35	16	29	12	39	16	242	2.58

TABLE 1 (CONT.)

RESPONSES ON SUBJECT CONTENT FOR SEX EDUCATION BY RANK ORDER OF APPROVAL

Content Topic	Rank[a]	SA		GA		UN		GD		SD		N	Mean
		No.	%	No.	%	No.	%	No.	%	No.	%		
Premarital Sexual Intercourse between Couples	15	52	21	85	35	28	13	26	11	49	20	242	2.70
Premarital Sexual Intercourse between Non-engaged Couples	16	54	21	81	33	30	14	28	12	49	20	242	2.73
Sexual Deviations and Perversions	17	43	18	77	32	46	20	38	16	36	15	242	2.75
Premarital Petting	18	54	22	70	29	28	13	42	17	46	19	242	2.79
Teenage Sexual Slang	19	44	18	64	26	30	14	41	17	61	25	242	3.02
Pornography and Erotic Literature	20	29	12	50	21	37	16	40	17	84	35	242	3.39
Oral Genital Sexual Contact	21	20	8	37	15	53	23	58	24	72	30	242	3.50
Sexual Techniques	22	12	5	25	10	29	13	53	22	121	50	242	4.00

* Due to rounding, percentages may not total 100% in each case.

[a] Computed according to mean score of respondents on each item.

[b] SA = Strongly Approve; GA = Generally Approve; UN = Uncertain; GD = Generally Disapprove; SD = Strongly Disapprove.

Existing literature substantiates these results. Southworth reported that his study of sex education in Wisconsin echoed findings of an older study in Pennsylvania which found that physiological subjects received major emphasis in school sex education. He further noted that no Wisconsin school covered all the topics surveyed in the study, and tended to avoid most controversial topics.[20] Johnson and Schutt found administrators to be favorable to almost all topics in sex education. Only one area, frigidity and impotency, received support from less than half (45 percent) of their respondents. Abortion, homosexuality, fertility and sterility were less acceptable topics than others, though they still received support from 60 to 70 percent of the respondents. Grade Teacher researchers presented their sample with a list of content areas including masturbation, homosexuality and venereal disease. A majority of teachers responding felt that all the subjects presented should be included in sex education before the end of high school.[21]

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[20] *Warren H. Southworth, "A Study in the Area of Family Life Education," High School Journal, 38:88 and 93, December, 1954.*

[21] *"Sex Education: Who Wants It," Grade Teacher, 86:63, November, 1968.*

On the most general level, it is clear that respondents agree with the idea of including sex education in the total school program. However, responses to specific references indicate that there is more support for integrating sex education in elementary school than for a secondary school approach of the same type. On the secondary level, however, a mixed response was evident. While 46 percent agreed that sex education on the secondary school level should be restricted by at least a "time period" allotment, 52 percent stated that it would not be desirable to integrate it into existing courses on that level.[22] The two academic areas most often mentioned (in the literature) as appropriate for integration of sex education are English and social studies. Responses to the two alternatives proposed relative to these areas were mixed.

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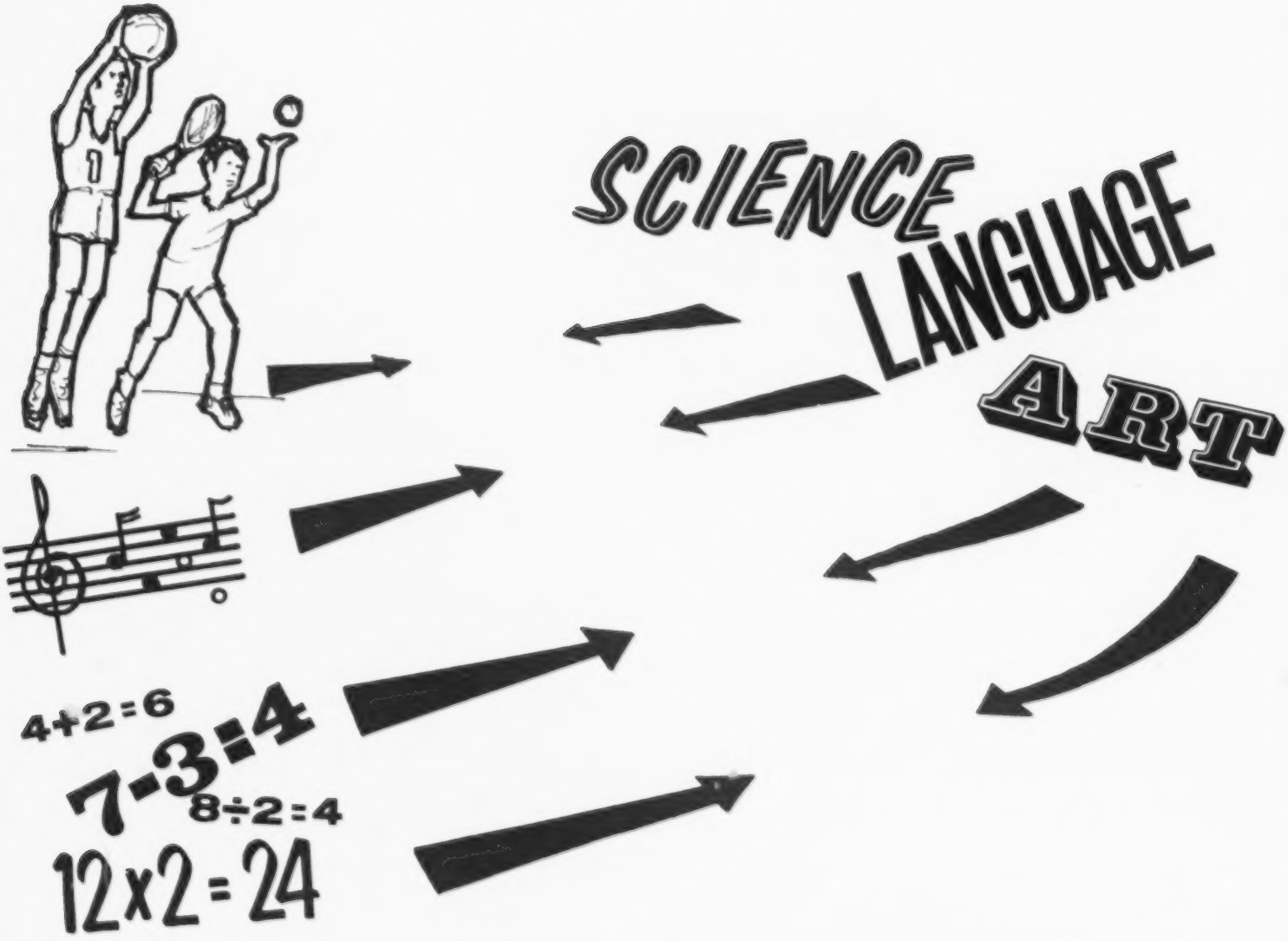
[22]*Schuck, op. cit., pp. 95-96.*


SCIENCE
LANGUAGE
ART
4+2=6
7-3=4
8÷2=4
12x2=24

The overall implication of the comparisons by demographic groups is that generalizations about group membership cannot be made strong enough to overcome the

essential

necessity

of

individual

consideration.

While some fragile projections about support from certain types of teachers and resistance from certain others might be made, the greater probability of exceptions exists. Variables that could have indicated practical implications, such as town size or position as administrator, elementary or secondary teacher, did not appear to be significant. What is further implied, therefore, is that allegations of teachers that administrators are negative to sex education, and vice-versa, are unfounded. Rather, while age and religious differences were significant in some cases, the

major

variable

is

still

the

idiosyncratic

nature

of

the

individual.

RECOMMENDATIONS FOR FURTHER RESEARCH

(1) An in-depth follow-up probe of some, or all, of the attitudes indicated in this study. By use of interviews, an investigator could attempt to determine what the particular motivations for certain responses were, what level of thinking existed on the subject, and what other alternatives educators had in mind. Confrontation about some of the choices expressed might provide insights into the underlying ideas which affected them, and into the firmness or mutability of these perceptions.[23]

(2) A pre-test--post-test study to investigate the effectiveness of inservice training on sex education attitudes of educators. Evaluations of openness, attitude toward specific alternatives, and liberalism could be made before an inservice program began. Like evaluations at its conclusion might indicate whether such a program significantly helps in changing perspectives and in enabling educators to productively deal with the major aspects of sex education planning, development and implementation.[24]

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[23] *Ibid., p. 137.*

[24] *Ibid., p. 140.*

(3) A study to test the consistency of expression of attitudes in an anonymous form, such as the one used in this investigation, and in a face to face school environment situation. A written form of attitude assessment could be mailed to a group of teachers and results formulated as in the present study. Then, with the investigator as participant-observer, these teachers could be convened for the purpose of discussing sex education for their school(s). The ensuing confrontation could be directed to the same issues contained in the written form, and the effective verbalized attitudes could be analyzed and compared.

(4) MOST OF ALL, A GREAT DEAL OF EVIDENCE IS NEEDED TO GIVE PERSPECTIVE TO EXPRESSIONS OF OPINION. DEPENDING ON FORMULATION OF GOALS AND CRITERIA, THEN, THE FOLLOWING ANALYSES WOULD BE VALUABLE

A. ANALYSIS OF STUDENTS' SEX VALUES BEFORE AND AFTER A SEX EDUCATION EXPERIENCE. EMPHASES ON ENCOURAGING SELF-DETERMINATION OF VALUES VERSUS SCHOOL-SPONSORED VALUE GUIDELINES COULD BE COMPARED FOR ACTUAL EFFECT ON STUDENTS' SEX VALUES.

B. ANALYSIS OF THE EFFECT OF CONTRACEPTION EDUCATION ON LEVELS OF PROMISCUITY, PREMARITAL PREGNANCY, AND ORIENTATION TOWARD SEX AND INTERPERSONAL RELATIONS.[25]

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[25] *Ibid.*

C. ANALYSIS OF THE EFFECT OF COEDUCATIONAL VERSUS SEX-SEGREGATED CLASSES AT CERTAIN AGES AND ON DIFFERENT SUBJECTS IN SEX EDUCATION.

D. ANALYSIS OF DIFFERENCES IN EFFECTS OF SEX EDUCATION ON STUDENTS WHEN DEALT WITH IN SEPARATE COURSES BY SPECIAL TEACHERS AS OPPOSED TO AN INTEGRATED SETTING USING REGULAR CLASSROOM TEACHERS.[26]

[26] *Ibid., p. 141.*

AT CERTAIN POINTS SEEMINGLY CONFLICTING ATTITUDES WERE EXPRESSED BY THE EDUCATORS SURVEYED. THIS COULD IMPLY THAT OPINIONS ON THE AREAS IN QUESTION WERE NOT WELL DEFINED AND THAT INCONSISTENCY WAS PARTLY A RESULT OF NOT HAVING CONSIDERED THE IDEAS PREVIOUSLY. THE LIKELIHOOD THAT THIS INFERENCE IS VALID IS STRENGTHENED BY THE FACT THAT 80 PERCENT OF THE RESPONDENTS REPORTED NO MORE THAN "SOME READING" AS THE EXTENT OF THEIR BACKGROUND IN SEX EDUCATION. IF EDUCATORS IN THE SCHOOLS ARE TO BE INVOLVED IN DEVELOPING SEX EDUCATION PROGRAMS AND IN MAKING DECISIONS ABOUT THEIR NATURE AND CONTENT, A NEED FOR INSERVICE TRAINING BEFOREHAND IS IMPLIED. AS IS OFTEN THE CASE AT PRESENT, UNINFORMED EDUCATORS ARE ASKING TO PLAN PROGRAMS AND MAKE POLICY DECISIONS WITHOUT KNOWLEDGE OR FORETHOUGHT. IF PRIOR EXPOSURE TO THE CONTENT OF THE FIELD AND TO THE RELEVANT THINKING OF SCHOLARS WERE MADE A PART OF THE PROCESS, NUMEROUS DIFFICULTIES AND INADEQUACIES MIGHT BE OVERCOME.

Certainly the individual's religious orientation will affect the priority system. Similarly, his ability to receive and process information has impact on internalized priorities. One's skill in coping in a sophisticated fashion with the ambiguity of our complex culture shadows his value filter as does the very media to which he exposes himself. When, in addition, he is expected to act in educational unison with others equally value-certain, his task is frequently overwhelming.

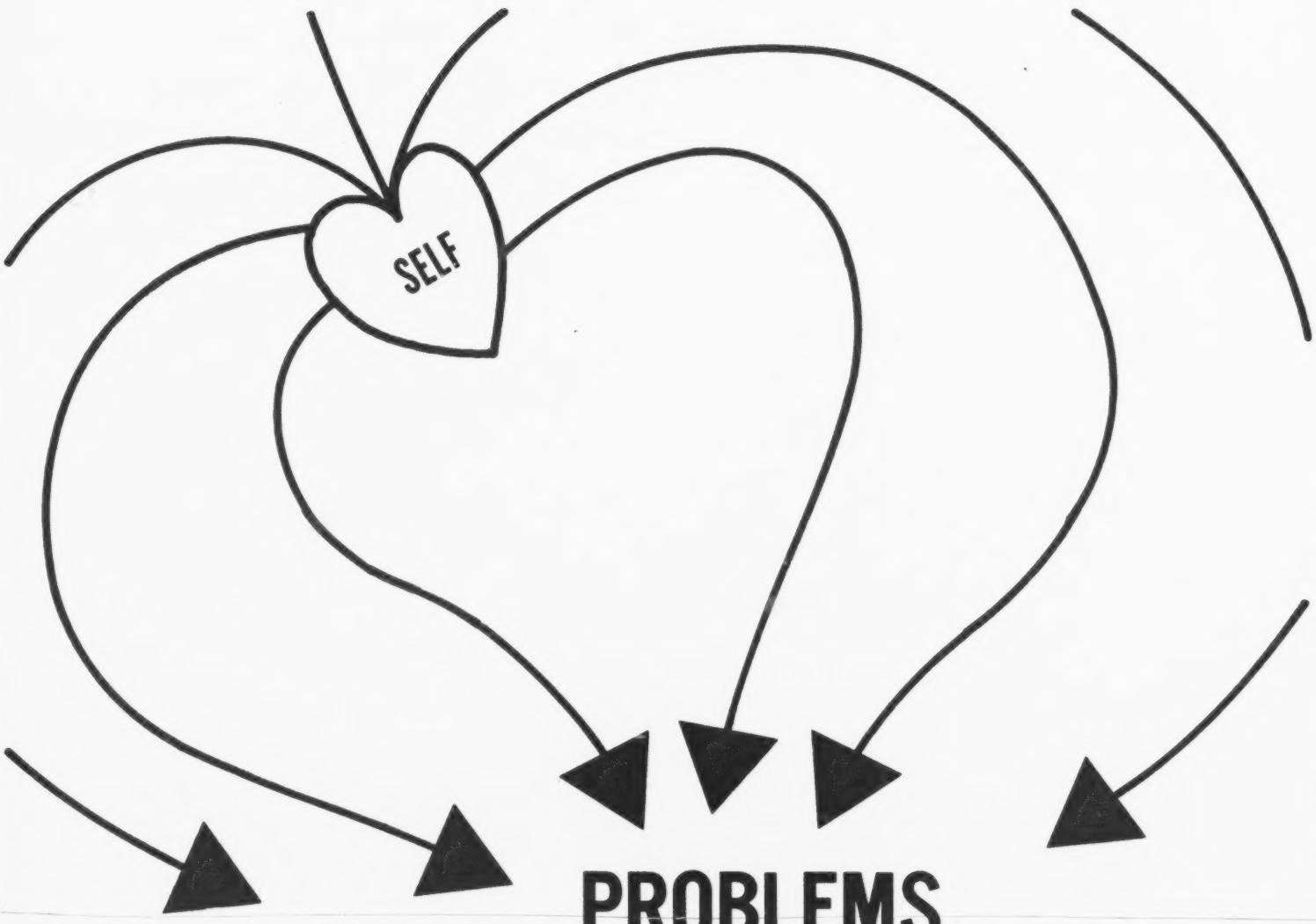
Despite the present lack of a process model from which to view and evaluate data, it would seem appropriate here to discuss the short-term and long-range implications of this study as it pertains to curricular implementation. Because it may prove useful to begin from a base of agreement, let us examine those content areas which elicited the highest degree of accord among those persons sampled. The topic of venereal disease drew heaviest support as content upon which educators concurred. It may be inferred from such consensus that this is an area already accepted as a legitimate concern and now subsumed under the general study of health. Further, it may be recognized that there is a consistency of value in our culture relative to disease. It should be noted that VD-prophylaxis as a content area ranked twelfth, indicating support for the notion that the disease model is a generally accepted one with which educators are already comfortable and feel competent to include in their already existing educational frameworks, whereas prophylaxis may infringe on less widely agreed upon values.

Of still further interest may be the consensual "break" which occurs between the third-ranked topic, "conception," and "divorce" which ranked fourth. Apparently this reflects the point at which a value differential can be seen to occur.

Educators, it would seem, comfortably agree to the need for the feasibility of including such biologically oriented topics as VD, menstruation and conception. However, the notion of teaching about divorce raises doubt in at least a few minds for still undetermined reasons.

> We might speculate here that the ethical
>
> > implications of coping with this issue in
> >
> > > a classroom context tend to raise questions
> > >
> > > > which progressively become more numerous as
> > > >
> > > > > the topics increase in sensitivity.

> Thus, specific sexual techniques as a content area appeared to be least appropriate, perhaps on the ground that instructional modes might be most difficult to devise.


SELF
PROBLEMS

It would appear, even to casual perusal, that the greatest degree of anticipated hazard lies in methodology and criteria for selection of personnel.

The authors suggest that a model designed to provide recurrent and continuing feedback to all segments of the community might enhance the possibility of community support for curricular decisions incorporating as part of education about sex. Further, careful consideration might be given to the integration of terminology which reduces ambiguity, decreases tensions and increases the degree of trust necessary to implement any curricular modification.

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APPENDIX A

SEX EDUCATION QUESTIONNAIRE

Part A: Please circle the one pair of letters next to each numbered statement which most closely corresponds to your frank and honest opinion about that statement.

Code: SA - Strongly Agree

GA - Generally Agree

UN - Uncertain about agreement or disagreement

GD - Generally Disagree

SD - Strongly Disagree

1. Sex education should be handled only by people trained as specialists in sex education . . . . . SA GA UN GD SD

2. Sex education in elementary school should be restricted to a separate unit of study. SA GA UN GD SD

3. Students should be encouraged to develop their own standards regarding what is appropriate premarital sexual behavior . . . SA GA UN GD SD

4. Students should be taught what contraception is and that it exists . . . . . SA GA UN GD SD

5. The scho regardin sexual b SA GA

6. The subj avoided SA GA

7. Elementa cation i present SA GA

8. Students their ow priate a SA GA

9. Separati would ge SA GA

10. Students contrace SA GA

11. The scho regardin and care SA GA

12. Coeducat priate f subject SA GA

APPENDIX A

X EDUCATION QUESTIONNAIRE

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to each numbered statement which
closely corresponds to your frank
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or disagreement

GD - Generally Disagree

SD - Strongly Disagree

ation should be handled only by
rained as specialists in sex edu-
. . . . . .
UN GD SD

ation in elementary school should
icted to a separate unit of study.
UN GD SD

should be encouraged to develop
n standards regarding what is ap-
e premarital sexual behavior . . .
UN GD SD

should be taught what contraception
hat it exists . . . . . .
UN GD SD

5. The school should give guidelines to students regarding what is appropriate premarital sexual behavior . . . . . .
SA GA UN GD SD

6. The subject of contraception should be avoided if possible . . . . . .
SA GA UN GD SD

7. Elementary schools should integrate sex education into all appropriate phases of their present curriculum . . . . . .
SA GA UN GD SD

8. Students should be encouraged to develop their own standards regarding what is appropriate as to kissing and caressing . . . . .
SA GA UN GD SD

9. Separating boys and girls for sex education would generally be a poor idea . . . . . .
SA GA UN GD SD

10. Students should not be taught how to use contraceptives . . . . . .
SA GA UN GD SD

11. The school should give guidelines to students regarding what is appropriate as to kissing and caressing . . . . . .
SA GA UN GD SD

12. Coeducational classes would be just as appropriate for sex education as for any other subject . . . . . .
SA GA UN GD SD

13. It would not be wise to teach how effective contraceptive techniques are . . . . . .
SA GA UN GD SD

14. It would be a good idea to include sex education in English class by discussing sexual areas in literature . . . . . .
SA GA UN GD SD

15. Students should be encouraged to develop their own standards regarding what is appropriate as to petting above the waist . . . .
SA GA UN GD SD

16. Coeducational classes in sex education would be more trouble than they are worth . . . .
SA GA UN GD SD

17. It would be a good thing for students to know all about the area of contraception . .
SA GA UN GD SD

18. Sex education in secondary schools should be restricted to a separate course or time period . . . . . .
SA GA UN GD SD

19. The school should give guidelines to students regarding what is appropriate as to petting above the waist . . . . . .
SA GA UN GD SD

20. Boys and girls should be separated when certain delicate subjects in sex education are discussed . . . . . .
SA GA UN GD SD

21. Education about contraceptives should be limited to telling what they are and what their purpose is . . . . . .
SA GA UN GD SD

22. It would not be desirable to integrate sex education into existing secondary school courses of study . . . . . .
SA GA UN GD SD

23. Students should be encouraged to develop their own standards regarding what is appropriate as to petting below the waist . . . .
SA GA UN GD SD

24. If they had inservice training, most teachers could handle sex education that was related to their teaching area . . . . . .
SA GA UN GD SD

25. The school should give guidelines to students regarding what is appropriate as to petting below the waist . . . . . .
SA GA UN GD SD

26. At some ages, coeducational classes in sex education would not be appropriate . . . . .
SA GA UN GD SD

27. Students should be encouraged to develop their own standards regarding what is appropriate as to sexual intercourse . . . . . .
SA GA UN GD SD

28. If they had inservice training, most understanding and sensitive teachers could do a good job with sex education if they wanted to
SA GA UN GD SD

29. It would not be appropriate to include discussions of sex as a social issue in the social studies classes . . . . . Part
SA GA UN GD SD

30. Sex education classes should always be coeducational, but boys and girls should be able to further pursue certain topics in separate groups if they want to . . . . . .
SA GA UN GD SD

31. The school should give guidelines to students regarding what is appropriate as to sexual intercourse . . . . . .
SA GA UN GD SD

32. Sex education should be made part of the total school program wherever it seems relevant . . . . . .
SA GA UN GD SD

33. Students should be told that contraceptives may be sold to unmarried, as well as married, people . . . . . .
SA GA UN GD SD

1.

34. Even if they had inservice training, most regular classroom teachers could not do a good job with sex education . . . . . .
SA GA UN GD SD

2.

It would not be appropriate to include discussions of sex as a social issue in the social studies classes . . . . . .
SA GA UN GD SD

Sex education classes should always be coeducational, but boys and girls should be able to further pursue certain topics in separate groups if they want to . . . . . .
SA GA UN GD SD

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SA GA UN GD SD

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SA GA UN GD SD

Students should be told that contraceptives may be sold to unmarried, as well as married, people . . . . . .
SA GA UN GD SD

Even if they had inservice training, most regular classroom teachers could not do a good job with sex education . . . . . .
SA GA UN GD SD

Part B: On the following pages is a list of some possible content topics for sex education. Definitions are provided for each topic so there will be no ambiguity of meaning. Your response to each item should indicate your honest opinion about whether that topic should be included somewhere in a school sex education program. Please indicate the degree of your approval or disapproval by circling the pair of letters which best expresses your opinion on each content topic. There is no special order in the arrangement of items.

Code: SA - Strongly Approve

GA - Generally Approve

UN - Uncertain about approval or disapproval

GD - Generally Disapprove

SD - Strongly Disapprove

1. MENOPAUSE: The final ending of menstruation or periods for the female; the end of the reproductive period, but not the end of sexual activity.
(Sometimes called the "change in life.") . .
SA GA UN GD SD

2. CONCEPTION: The beginning of a new life, when the egg is penetrated by the sperm . .
SA GA UN GD SD

3. DIVORCE: The legal ending of a lawfully contracted marriage . . . . . .
SA GA UN GD SD

4. VENEREAL DISEASE: Diseases communicated mainly by sexual intercourse, such as syphilis or gonorrhea . . . . . .
SA GA UN GD SD

5. VENEREAL DISEASE PROPHYLAXIS: Drugs or devices (such as the condom or rubber sheath pulled over an erect penis) used to prevent venereal disease . . . . . .
SA GA UN GD SD

6. MENSTRUATION: The discharge of blood and other materials from the female reproductive tract. Also called a "period" . . . . . .
SA GA UN GD SD

7. MASTURBATION: Consists of stimulating one's own sexual organs by the use of hands, muscular motions, mechanical means, or some other method in order to obtain sexual release . .
SA GA UN GD SD

8. CONTRACEPTION: The use of devices or drugs to avoid conception or birth; also called birth control . . . . . .
SA GA UN GD SD

9. HOMOSEXUALITY: The state in which the individual is erotically attracted to members of his or her own sex . . . . . .
SA GA UN GD SD

10. ABORTION
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The legal ending of a lawfully
ed marriage . . . . . .
UN GD SD

DISEASE: Diseases communicated
y sexual intercourse, such as
or gonorrhea . . . . . .
UN GD SD

DISEASE PROPHYLAXIS: Drugs or de-
uch as the condom or rubber sheath
ver an erect penis) used to prevent
disease . . . . . .
UN GD SD

TION: The discharge of blood and
terials from the female reproductive
Also called a "period" . . . . . .
UN GD SD

TION: Consists of stimulating one's
al organs by the use of hands, muscu-
ons, mechanical means, or some other
n order to obtain sexual release . .
UN GD SD

PTION: The use of devices or drugs
conception or birth; also called
ntrol . . . . . .
UN GD SD

ALITY: The state in which the indi-
s erotically attracted to members of
er own sex . . . . . .
UN GD SD

10. ABORTION: The removal of a human fetus before birth from a pregnant woman; the interruption of pregnancy . . . . . .
SA GA UN GD SD

11. SEXUAL DEVIATIONS AND PERVERSIONS: Any kind of activity or outlet that deviates from what is customary or considered normal . . .
SA GA UN GD SD

12. IMPOTENCY AND FRIGIDITY: Impotency refers to the male who is unable to perform sexual intercourse due to an inability to achieve and maintain an erection; frigidity refers to the female who is indifferent, cold and unable to have orgasm.
(NOT the same as Fertility) . . . . . .
SA GA UN GD SD

13. ILLEGITIMACY: Having children born out of wedlock . . . . . .
SA GA UN GD SD

14. ORAL-GENITAL SEXUAL CONTACTS: The stimulation of sexual organs by another person's mouth; may be between man and woman or members of the same sex . . . . . .
SA GA UN GD SD

15. MALE AND FEMALE SEX ROLES: Behavior expected of a male or female, maleness or femaleness - usually according to one's biological sex .
SA GA UN GD SD

16. SEXUAL BEHAVIOR WITHIN MARRIAGE: Any sexual relations between marital partners . . . . .
SA GA UN GD SD

17. PREMARITAL SEXUAL INTERCOURSE BETWEEN COUPLES: (Self-explanatory) . . . . . .
SA GA UN GD SD

18. PREMARITAL SEXUAL INTERCOURSE BETWEEN NON-ENGAGED COUPLES: (Self-explanatory) . .
SA GA UN GD SD

19. PREMARITAL PETTING: Sexual contact that excludes intercourse. It includes all forms of stimulation from stroking, embracing, and kissing to every sort of contact with the partner's sexual organs . . . . . .
SA GA UN GD SD

20. TEENAGE SEXUAL SLANG: Words used by teenagers (and sometimes adults) to refer to sexual acts, attitudes, jokes or vulgarities
SA GA UN GD SD

21. PORNOGRAPHY AND EROTIC LITERATURE: The presentation of sexually arousing material in literature, art, motion pictures, or other means of communication and expression. May be considered to be obscene depending on one's definition of obscenity . . . . . .
SA GA UN GD SD

22. SEXUAL TECHNIQUES: The variety of sexual skills and methods that individuals use in their sexual behavior. Includes mention of positions for intercourse, etc. . . . .
SA GA UN GD SD

Part C: This
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1. What is y

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____ Teac
____ Teac
____ Admi

Other ___

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3. What is yo

4. Male or Fe

AL INTERCOURSE BETWEEN
explanatory) . . . . . .
SD

AL INTERCOURSE BETWEEN
PLES: (Self-explanatory) . .
SD

ING: Sexual contact that ex-
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rom stroking, embracing, and
sort of contact with the
organs . . . . . .
SD

LANG: Words used by teen-
times adults) to refer to
itudes, jokes or vulgarities
SD

EROTIC LITERATURE: The pre-
ually arousing material in
motion pictures, or other
cation and expression. May
be obscene depending on
of obscenity . . . . . .
SD

S: The variety of sexual
ds that individuals use in
avior. Includes mention
intercourse, etc. . . . .
SD

Part C: This part is included to help us analyze the data more easily and effectively. Please check the category, or write in the answer, that most accurately replies to each question.

1. What is your present position?

____ Teacher, K-6
____ Teacher, 7-12
____ Teacher, special category
____ Administrator

Other _____
write in category

2. What is your main teaching assignment?

____ Self-contained class
____ Math
____ Science
____ English
____ Social Studies
____ Art
____ Industrial Arts
____ Music
____ Phys. Ed.
____ Foreign Language
____ Administration

Other _____
write in category

3. What is your age? _____years

4. Male or Female? ____Male ____Female

5. How many years have you been in education (teaching and/or administration)? ____years

6. What is your religious affiliation?

____ Catholic
____ Protestant
____ Jewish
____ Other

7. How often do you attend church or synagogue? (Please check one)

____ More than once a week
____ Once a week
____ Every two weeks
____ Once a month
____ Seldom
____ Never

8. What is your marital status?

____ Married
____ Single
____ Widowed
____ Divorced

9. How many children do you have? _____

10. What is the highest degree you hold?

____ Bachelor's
____ Master's
____ 6th Year or Doctorate

11. What is the popula
in?

____ Under 5,000
____ 5,000 - 9,999
____ 10,000 - 29,9
____ 30,000 - 99,9
____ Over 100,000

12. Approximately how
say you have in th
(Check as many as

____ None
____ Some Reading
____ Much Reading
____ Have had a co
education
____ Other (Explai

13. Have you ever taug
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____ Yes ____ No

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do you have? _____

est degree you hold?

Doctorate

11. What is the population of the town you teach in?

____ Under 5,000
____ 5,000 - 9,999
____ 10,000 - 29,999
____ 30,000 - 99,999
____ Over 100,000

12. Approximately how much background would you say you have in the field of sex education? (Check as many as apply)

____ None
____ Some Reading
____ Much Reading
____ Have had a course which <u>emphasized</u> sex education
____ Other (Explain)

13. Have you ever taught a course or unit in sex education (as defined in the cover letter)?
____ Yes ____ No

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